

Montana Petroleum Tank Release Compensation Board

Application for Petroleum Release Eligibility Form 1-R

Complete this form if there has been a petroleum release from an underground or aboveground petroleum storage tank and/or associated piping at this facility. Submission of this form indicates that the owner or operator of the petroleum storage tanks will be requesting reimbursement for corrective action and/or third party bodily injury or property damage costs.

A. CONTACT INFORMATION — Please record names of the tank owner and operator.

Tank Owner

Tank Operator

Name

Name

Address

Address

City

State

Zip

City

State

Zip

Telephone Number

Telephone Number

B. Facility Information — Please record facility and release information.

Facility Name

Facility ID Number

Street Address

County

City

State

Zip

DEQ Release Number

C. INSURANCE INFORMATION — The Board approved the use of the Owner/Operator's Report of Insurance or Other Third Party Liability Form on June 26, 2001. The Board Staff must receive a completed Owner/Operator's Report of Insurance or Other Third Party Liability Form (PTRCB Form 7) before the first claim can be reimbursed. The Form 7 requests information about ownership history, insurance information, other responsible persons and insurance funds received.

D. PETROLEUM STORAGE TANK(S) INFORMATION — Complete for all tanks that are or were at this facility. This section may be copied as many times as necessary.

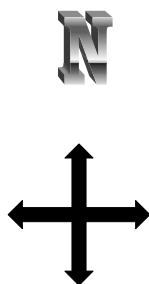
Description by Tank	#1	#2	#3	#4	#5
Underground (U) or Aboveground (A)					
Capacity (Gallons)					
Substance currently or last stored — Gas (G); Diesel (D); Waste Oil (WO); Heating Oil (HO); Aviation (A); Other(O) (Specify in lower box)					
Tank material -Fiberglass (F), Bare Steel (BS), Cathodically Protected Steel (CPS), FRP (FRP), Concrete (C), CLAD (CLAD), Poly Tank Jacket (PTJ)					
Date tank installed (Mo/Yr)					
Date tank last used (Mo/Yr)					
Is tank currently in use? (Yes/No).					
Was tank removed from the ground? (Yes/No)					
If removed from ground, when? (Mo/Yr)					
Was tank closed in place? (Yes/No)					
If closed in place, when? (Mo/Yr)					
Is/was the tank designed and constructed with rigid inner and outer walls, separated by an interstitial space that is/was capable of being monitored for leakage? (Yes/No)					
Where is/was the tank located? Farm (F), Ranch (R), Residential (RES) or Commercial property (C).					
Is/was the tank used to store heating oil which is/was consumed on the premises? (Yes/No)					
Is/was the tank located at a refinery, terminal of a refiner or oil and gas production facility? (Yes/No)					
Is/was the tank owned by or exclusively used by an agency of the federal government? (Yes/No)					
Is/was the tank mobile and used to transport petroleum or petroleum products from one place to another? (Yes/No)					
Is the tank now or was it ever owned by or under the control of a railroad? (Yes/No)					
Is this property where tanks are/were located leased from a railroad? (Yes*/No)					
Was the tank operated by a lessee of the railroad in the course of non-railroad operations? (Yes/No)					
Is/was the release from the tank? (Include spills and overfills) (Yes(Y) / No(N) / Unknown(U))					

*If yes, copies of present and past property leases or other documentation deemed acceptable by Board staff that would indicate a history of ownership of tanks must be included for the eligibility form to be considered complete.

E. PIPING INFORMATION — Complete for the piping associated with the tank(s) included in Section D.

Description of Piping	#1	#2	#3	#4	#5
Piping type – Pressure (P) or Suction (S)					
Underground (U) or Aboveground (A)					
Piping material made of:(Fiberglass(FRP),Flex(F) BareSteel(BS),Cathodically Protected Steel(CPS))					
Is piping currently in use? (Yes/No).					
Date piping was last used (Mo/Yr)					
Is/was the piping removed from ground? (Yes/No), if yes, when (Mo/Yr) in lower box.					
Is/was piping closed in place (Yes/No)? If closed in place, when? (Mo/Yr) in lower box.					
Is/was the pipe designed and constructed with rigid inner and outer walls separated by an interstitial space that is capable of being monitored for leakage? (Yes/No)					
Is/was release from the piping? (Yes(Y) /No(N)/Unknown(U))					
When did you have knowledge of the release? (Mo/Yr)					

- F. **PETROLEUM STORAGE TANK(S) INFORMATION -- Complete a facility site diagram for all components of all the tank systems located at the facility, regardless of which tank system was the source of the release.** Please include buildings and other features of the facility.



G. CERTIFICATION

Have you, as the owner/operator of the tank that leaked, been convicted of a substantial violation of state or federal law or rule that relates to the installation, operation, or management of petroleum storage tanks?

☐ Yes

☐ No

I, the owner or operator of this facility certify the information contained within this form is true and correct. I fully understand that any fraudulent or erroneous information may jeopardize the eligibility for reimbursement from the Petroleum Tank Release Cleanup Fund for this release. With my signature, I authorize the Petroleum Tank Release Compensation Board to visit the site to verify the information contained within this form at a time mutually agreed upon by both parties.

Tank Owner or Operator Signature

Tank Owner or Operator Name (Typed or Printed)

Date

SUBSCRIBED and SWORN to before me on this _____ day of _____ 20 ____.

Notary Public

(S E A L)

Notary Public for the State of _____
Residing at _____
My Commission Expires _____

**Submit completed form to :
PETROLEUM TANK RELEASE COMPENSATION BOARD
PO BOX 200902
HELENA, MT 59620-0902**